

Schmieding /ILC Solutions Forum on Elder Caregiving

June 2, 2005 • 9 am -12 noon

Schmieding Conference on Elder Homecare

June 2, 2005 • 12 noon - 4 pm

REPORT OF FINDINGS

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CREATING A COMMUNITY OF PROFESSIONALLY-TRAINED HOME CAREGIVERS

SOLUTIONS FOR KEEPING ELDERS AT HOME FOR LIFE

CREATING A COMMUNITY OF PROFESSIONALLY-TRAINED HOME CAREGIVERS

SOLUTIONS FOR KEEPING ELDERS AT HOME FOR LIFE:

TESTIMONY OF BETH C. VAUGHAN-WROBEL, EdD, RN, FAAN TO THE POLICY COMMITTEE OF THE WHITE HOUSE CONFERENCE ON AGING

My name is Dr. Beth Vaughan-Wrobel. I am the Associate Director/Director of Education of the Schmieding Center for Senior Health and Education. Through a generous gift from Lawrence H. Schmieding, the Schmieding Center opened as the first of seven outreach centers on aging through the Arkansas Aging Initiative of the Donald W. Reynolds Institute on Aging at the University of Arkansas for Medical Sciences. I have had the privilege of serving the Schmieding Center, since it opened in 1999, to meet Mr. Schmieding's goal of keeping older adults out of nursing homes. The mission of the Schmieding Center is to improve the quality of life of older adults and their families through education and patient care.

SUMMARY OF FINDINGS

I am here this morning to discuss the need for creating the standards and structure for support of a professionally-trained community of paid in-home caregivers who provide personal care and other non-medical services to older adults in the home and who understand the behavioral problems that may be present when caring for an older adults with a dementing or other chronic disease.

- There are no caregiver training requirements for independent contractors working as in-home paid caregivers.
- There are no standards for training and no structure in place today to support independent contractors working as in-home paid caregivers. There is no well-organized national organization or association that supports this evolving cadre of direct care providers to help establish caregiving as a career.
- There are caregiver training requirements set by Medicare/Medicaid regulations for personal care and home health aides working for home health agencies. However, only elders who require skilled nursing care can qualify for personal care provided by a home health agency. Such personal care must be prescribed by a physician and is available on a limited basis--not 24/7 for extended periods of time--as some families need. This is *not* long-term care. Families cannot simply request personal care services provided by a home health agency.
- Nearly all families must contract privately with individual caregivers--and they must find them on their own. Most of the caregivers they find are untrained. Families sometimes receive lists of potential in-home caregivers from hospitals or health care

agencies. Sometimes they learn about potential caregivers by referral or through advertising. Many of the caregivers found through these means have a heart-to-serve, but they have no formal training and limited knowledge about caring for older adults in the home.

- In-home caregiving is not considered a career path. Caregiving is generally viewed as minimum wage work. Currently there is no way for them to receive benefits, be bonded, receive further training and continuing education, etc. They are typically among the medically uninsured, a real problem in our health care system today.
- As an independent contractor, the case load for an in-home caregiver varies and may not provide regular work; therefore, many in-home caregivers leave the field and seek other employment that is often more stable, better-paid, and may even include benefits. This environment results in families often finding it very difficult to find and keep in-home paid caregivers when needed.
- For profit companies do exist that provide non-medical caregiving to older adults in the home, but few such companies exist that also can and do provide the physical and behavioral care that is often needed to care for older adults with dementia or other chronic, debilitating conditions. Many of the private companies require little or no training for the caregivers they hire. When physical care is needed, most states have outdated regulations prohibiting any organization except a home health agency from providing that care. But if the older adult doesn't require skilled nursing care, they can't get the caregiving help they need to stay at home from *any* organization.

RECOMMENDATIONS AND REFORMS

Innovative recommendations are needed to break with the past and find new ways to create a community of professionally-trained home caregivers--a community with the shared standards and structure needed to grow a large cadre of competent, compassionate, professionally-trained in-home caregivers.

- Develop and implement national standards for the education and training of in-home paid caregivers.
- Create a national organization/association for the new generation of professionally-trained in-home caregivers, most of whom are independent contractors. The organization will oversee the accreditation process of curricula used to train this cadre of caregivers, the certification/licensing process, the continuing education requirements to maintain certification, provide opportunities for group rates on medical and dental insurance, bonding, etc. Family members needing in-home paid caregivers will then be assured that a caregiver certified by the organization has been professionally-trained in home caregiving skills, tested for competency, and is continuing to add new caregiving knowledge.
- Establish new in-home caregiving quality standards so that all third party payers, including CMS, require that all in-home caregivers must be members in good standing in the national professional home caregiver certification organization to qualify for reimbursement. All agencies or companies providing in-home caregiver

services for a fee to families must meet the same membership, training, continuing education, and quality standards for their employees.

- Allow, encourage, and incentivize a new type of in-home caregiver staffing agency to provide families with caregivers who are professionally-trained in the physical care and non-medical care of an older adult and who understand the behavioral issues that might arise. Keeping the cost of caregivers placed through these agencies at an affordable level, while paying the caregivers a reasonable wage and benefits, would provide professional caregivers with career stability and provide families that need paid caregiving for a loved one with a reliable source for trained caregivers.
- All in-home caregiving recommendations depend on the removal of federal and state regulatory roadblocks to professional in-home caregiving and geriatric care management.

In-home caregiving must be re-defined to separate it from "home health" care (skilled nursing) and its restrictions. Caregiving is *not* "health care" and should not be regulated as is medical care.

Removing the regulatory barriers to in-home caregiving may be the single most important recommendation the White House Conference on Aging can make.